## INSTRUCTIONS FOR APPLYING FOR AN ENDODONTIC SPECIALTY LICENSE

Your specialty application must be accompanied by a check in the amount of \$60.00 payable to the Kentucky Board of Dentistry. The completed application, fee and cases <u>must</u> be on file in the Board office at least thirty (30) days prior to the examination date or you will not be eligible to take the examination. There are no exceptions to this rule.

The spe	cialty examination is administere	I at the Kentucky Board of Dentistry, 312 Whittington Pkwy, Suite	101, Louisville K	Y
40222.	You should report at	The next examination will be administered on		

## QUALIFICATION FOR APPLYING FOR SPECIALTY LICENSURE

- 1. You must possess satisfactory moral and ethical standing in the dental profession.
- 2. You must be currently licensed to practice dentistry in the Commonwealth of Kentucky.
- 3. Once you obtain your specialty license, you must limit your practice to that particular specialty.
- 4. You must submit satisfactory evidence to the Board that you have completed a period of not less than two (2) years study in graduate or postgraduate courses after graduation from an accredited dental school.
- 5. You must meet the minimum requirements for membership in the respective American specialty organizations recognized by the American Dental Association.

## **REQUIREMENTS FOR CASE REPORTS:**

Each applicant shall be required to present five (5) cases of endodontically treated teeth. At least one (1) case history must include a tooth treated by endodontic surgery and at least two (2) of the case histories must concern treated molar teeth.

Each case history must be accompanied by the following radiographs, dated and mounted in chronological sequence:

- 1. Pre-operative periapical of each tooth to be treated.
- 2. Post-operative periapical of each tooth treated, taken the same day that the canals were filled.
- 3. Post-operative periapical of each tooth treated, taken six (6) months or later after completion of treatment.

Requirements for this radiograph may be waived at the discretion of the Board. Application for this waiver should be made in the form of a letter to the Board. Cases submitted without recall will receive a 0.

The case history of the surgically treated tooth should include a pre-surgical periapical taken the day of surgery and post-surgical periapical taken the same day.

The applicant may include any additional radiographs considered to be pertinent.

Case reposts shall be typewritten on 81/2 x 11 white bond paper; double-spaced and typed on one side only. Each case report shall be placed on a square cut filing folder approximately

91/2 x 111/2 inches. Attach the sheets of each report to the inside of the back cover of the filing folder at the top left, or at both top corners.

## WRITTEN AND ORAL EXAMINATION

The written examination will be given prior to the oral and practical examinations. Subject matter covered will include the clinical, biological, and anatomical aspects of endodontics. The oral examination will cover the same aspects of endodontics and may also include questions relating to the case reports of the candidate.

FOR FURTHER INFORMATION PLEASE CONTACT:

KENTUCKY BOARD OF DENTISTRY 312 WHITTINGTON PKWY, SUITE 101 LOUISVILLE, KENTUCKY 40222 (502) 429-7280